

Exhibit 26

TAYLOR COUNTY HUMAN SERVICES DEPARTMENT

Name Tamara LoertscherToday's Date: 10-9-2014

Today, we are using The **Oral Cube™ Oral Fluid Drug and Alcohol Screen Device** AMP/mAMP/COC/OPI/THC/PCP/BZO/OXY/MTD/BAR/BUP/ACL which is a lateral flow chromatographic immunoassay for the qualitative detection of: Amphetamine, Methamphetamine, Cocaine, Opiates, Marijuana, Phencyclidine, Benzodiazepines, Oxycodone, Methadone, Barbiturates, Buprenorphine, Alcohol and their metabolites in oral fluids at the following cut-off concentrations:

Test	Calibrator	Cut-off	Results
Amphetamine (AMP)	D-Amphetamine	50 ng/mL	Neg
Methamphetamine (mAMP)	D-Methamphetamine	50 ng/mL	Neg
Cocaine (COC)	Benzoylcegonine	20 ng/mL	Neg
Opiates (OPI)	Morphine	40 ng/mL	Neg
Marijuana (THC)	11-nor- Δ^9 -THC-9 COOH	12 ng/mL	Neg
	Δ^9 -THC	75 ng/mL	
Phencyclidine (PCP)	Phencyclidine	10 ng/mL	Neg
Benzodiazepines (BZO)	Oxazepam	50 ng/mL	Neg
Oxycodone (OXY)	Oxycodone	50 ng/mL	Neg
Methadone (MTD)	Methadone	75 ng/mL	Neg
Barbiturates (BAR)	Secobarbital	300 ng/mL	Neg
Buprenorphine (BUP)	Buprenorphine	10 ng/mL	Neg
Alcohol (ACL)	Alcohol	> 0.02 % B.A	-

****Per Taylor County Alcohol and Drug Monitoring Program Policy, all positive results may indicate a need for a referral to clinic/lab of client's choice for confirmation of results.**

Due to results of test, client is being referred for lab to _____ . This should be completed this by ___/___/2014.

Tammy Lautsch 10-9-14
Signature of Client Date

Doreen M. Anderson 10-9-2014
Taylor County Human Services Staff Date



540 East College Street Medford, WI 54451-2027
Phone (715) 748-3332

CONFIDENTIAL

Loertscher000545

TAYLOR COUNTY HUMAN SERVICES DEPARTMENT

Name Tammy LoertscherToday's Date: 10/16/14

Today, we are using The **Oral Cube™ Oral Fluid Drug and Alcohol Screen Device** AMP/mAMP/COC/OPI/THC/PCP/BZO/OXY/MTD/BUP/ACL which is a lateral flow chromatographic immunoassay for the qualitative detection of: Amphetamine, Methamphetamine, Cocaine, Opiates, Marijuana, Phencyclidine, Benzodiazepines, Oxycodone, Methadone, Barbiturates, Buprenorphine, Alcohol and their metabolites in oral fluids at the following cut-off concentrations:

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	Δ^9 -THC	75 ng/mL	
Phencyclidine (PCP)	Phencyclidine	10 ng/mL	neg
Benzodiazepines (BZO)	Oxazepam	50 ng/mL	neg
Oxycodone (OXY)	Oxycodone	50 ng/mL	neg
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Buprenorphine (BUP)	Buprenorphine	10 ng/mL	neg
Alcohol (ACL)	Alcohol	> 0.02 % B.A	-

****Per Taylor County Alcohol and Drug Monitoring Program Policy, all positive results may indicate a need for a referral to clinic/lab of client's choice for confirmation of results.**

Due to results of test, client is being referred for lab to _____. This should be completed this by ____/____/2014.

Tammy Loertscher 10-16-2014
Signature of Client Date

Darlene M. Anderson 10-16-2014
Taylor County Human Services Staff Date

540 East College Street Medford, WI 54451-2027
Phone (715) 748-3332

TAYLOR COUNTY HUMAN SERVICES DEPARTMENT

Name Tammy Loertscher,Today's Date: 10-24-2014

Today, we are using The *Oral Cube™ Oral Fluid Drug and Alcohol Screen Device* AMP/mAMP/COC/OPI/THC/PCP/BZO/OXY/MTD/BAR/BUP/ACL which is a lateral flow chromatographic immunoassay for the qualitative detection of: Amphetamine, Methamphetamine, Cocaine, Opiates, Marijuana, Phencyclidine, Benzodiazepines, Oxycodone, Methadone, Barbiturates, Buprenorphine, Alcohol and their metabolites in oral fluids at the following cut-off concentrations:

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	Δ^9 -THC	75 ng/mL	
Phencyclidine (PCP)	Phencyclidine	10 ng/mL	neg
Benzodiazepines (BZO)	Oxazepam	50 ng/mL	neg
Oxycodone (OXY)	Oxycodone	50 ng/mL	neg
Methadone (MTD)	Methadone	75 ng/mL	neg
Barbiturates (BAR)	Secobarbital	300 ng/mL	neg
Buprenorphine (BUP)	Buprenorphine	10 ng/mL	neg
Alcohol (ACL)	Alcohol	> 0.02 % B.A	—

**Per Taylor County Alcohol and Drug Monitoring Program Policy, all positive results may indicate a need for a referral to clinic/lab of client's choice for confirmation of results.

Due to results of test, client is being referred for lab to _____ . This should be completed this by ___/___/2014.

Tammy Loertscher 10/24/14
Signature of Client Date

Dalene M. Anderson 10-24-2014
Taylor County Human Services Staff Date

540 East College Street Medford, WI 54451-2027
Phone (715) 748-3332

**TAYLOR COUNTY
HUMAN SERVICES DEPARTMENT**

October 27, 2014

Honorable Douglas T. Fox
Taylor County Circuit Court
224 South Second Street
Medford, Wisconsin 54451

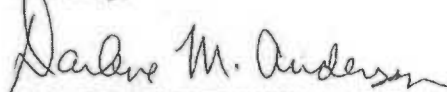
Re: Tamara Loertscher – DOB [REDACTED] – Case #14JC09 - Travel

Dear Judge Fox,

This letter is to inform the court that Tamara Loertscher will be traveling outside the state on a trip to the state of Georgia with her significant other Dondi Ellner, from October 27, 2014 through November 10, 2014.

If you have questions about this, please feel free to call me at your convenience.

Sincerely,



TAYLOR COUNTY HUMAN SERVICES DEPARTMENT
Darlene Anderson, CFS Social Worker

PC- Attorney Michael Shiffler
Attorney Courtney Graff
Attorney Justin Wolff
Tammy Loertscher

540 East College Street Medford, WI 54451-2027
Phone (715) 748-3332

CONFIDENTIAL

Loertscher000548

TAYLOR COUNTY HUMAN SERVICES DEPARTMENT

Name Tammy LoertscherToday's Date: 11-19-2014

Today, we are using The **Oral Cube™ Oral Fluid Drug and Alcohol Screen Device** AMP/mAMP/COC/OPI/THC/PCP/BZO/OXY/MTD/BAR/BUP/ACL which is a lateral flow chromatographic immunoassay for the qualitative detection of: Amphetamine, Methamphetamine, Cocaine, Opiates, Marijuana, Phencyclidine, Benzodiazepines, Oxycodone, Methadone, Barbiturates, Buprenorphine, Alcohol and their metabolites in oral fluids at the following cut-off concentrations:

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Opiates (OPI)	Morphine	40 ng/mL	neg
Marijuana (THC)	11-nor- Δ^9 -THC-9 COOH	12 ng/mL	neg
	Δ^9 -THC	75 ng/mL	
Phencyclidine (PCP)	Phencyclidine	10 ng/mL	neg
Benzodiazepines (BZO)	Oxazepam	50 ng/mL	neg
Oxycodone (OXY)	Oxycodone	50 ng/mL	neg
Methadone (MTD)	Methadone	75 ng/mL	neg
Barbiturates (BAR)	Secobarbital	300 ng/mL	neg
Buprenorphine (BUP)	Buprenorphine	10 ng/mL	neg
Alcohol (ACL)	Alcohol	> 0.02 % B.A	neg

****Per Taylor County Alcohol and Drug Monitoring Program Policy, all positive results may indicate a need for a referral to clinic/lab of client's choice for confirmation of results.**

Due to results of test, client is being referred for lab to _____ . This should be completed this by ___/___/2014.

Tammy Loertscher
Signature of Client

11-19-2014
Date

Darlene M. Anderson
Taylor County Human Services Staff

11-19-2014
Date

540 East College Street Medford, WI 54451-2027
Phone (715) 748-3332

TAYLOR COUNTY HUMAN SERVICES DEPARTMENT

Name Tammy Loertscher,Today's Date: 11-25-2014

Today, we are using The **Oral Cube™ Oral Fluid Drug and Alcohol Screen Device** AMP/mAMP/COC/OPI/THC/PCP/BZO/OXY/MTD/BAR/BUP/ACL which is a lateral flow chromatographic immunoassay for the qualitative detection of: Amphetamine, Methamphetamine, Cocaine, Opiates, Marijuana, Phencyclidine, Benzodiazepines, Oxycodone, Methadone, Barbiturates, Buprenorphine, Alcohol and their metabolites in oral fluids at the following cut-off concentrations:

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Marijuana (THC)	11-nor- Δ^9 -THC-9 COOH	12 ng/mL	neg
	Δ^9 -THC	75 ng/mL	
Phencyclidine (PCP)	Phencyclidine	10 ng/mL	neg
Benzodiazepines (BZO)	Oxazepam	50 ng/mL	invalid
Oxycodone (OXY)	Oxycodone	50 ng/mL	neg
Methadone (MTD)	Methadone	75 ng/mL	neg
Barbiturates (BAR)	Secobarbital	300 ng/mL	neg
Buprenorphine (BUP)	Buprenorphine	10 ng/mL	neg
Alcohol (ACL)	Alcohol	> 0.02 % B.A	neg

****Per Taylor County Alcohol and Drug Monitoring Program Policy, all positive results may indicate a need for a referral to clinic/lab of client's choice for confirmation of results.**

Due to results of test, client is being referred for lab to _____ . This should be completed this by / /2014.

Tammy Loertscher 11-25-2014
Signature of Client Date

Debra M. Anderson 11-25-2014
Taylor County Human Services Staff Date

540 East College Street Medford, WI 54451-2027
Phone (715) 748-3332

TAYLOR COUNTY HUMAN SERVICES DEPARTMENT

Name Tammy LoertscherToday's Date: 12-2-2014

Today, we are using The *Oral Cube™ Oral Fluid Drug and Alcohol Screen Device* AMP/mAMP/COC/OPI/THC/PCP/BZO/OXY/MTD/BAR/BUP/ACL which is a lateral flow chromatographic immunoassay for the qualitative detection of: Amphetamine, Methamphetamine, Cocaine, Opiates, Marijuana, Phencyclidine, Benzodiazepines, Oxycodone, Methadone, Barbiturates, Buprenorphine, Alcohol and their metabolites in oral fluids at the following cut-off concentrations:

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Cocaine (COC)	Benzoyllecgonine	20 ng/mL	neg
Opiates (OPI)	Morphine	40 ng/mL	neg
Marijuana (THC)	11-nor- Δ^9 -THC-9 COOH	12 ng/mL	neg
	Δ^9 -THC	75 ng/mL	
Phencyclidine (PCP)	Phencyclidine	10 ng/mL	neg
Benzodiazepines (BZO)	Oxazepam	50 ng/mL	neg
Oxycodone (OXY)	Oxycodone	50 ng/mL	neg
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Barbiturates (BAR)	Secobarbital	300 ng/mL	neg
Buprenorphine (BUP)	Buprenorphine	10 ng/mL	neg
Alcohol (ACL)	Alcohol	> 0.02 % B.A	neg

****Per Taylor County Alcohol and Drug Monitoring Program Policy, all positive results may indicate a need for a referral to clinic/lab of client's choice for confirmation of results.**

Due to results of test, client is being referred for lab to _____ . This should be completed this by ___/___/2014.

Tammy Loertscher 12-2-14
Signature of Client Date

Darlene M. Anderson 12-2-2014
Taylor County Human Services Staff Date

540 East College Street Medford, WI 54451-2027
Phone (715) 748-3332